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Sequence Number: \_\_\_\_\_

Notice ID(s): \_\_\_\_\_

File Date: \_\_\_\_\_

# Notice of Rulemaking Hearing

*Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.*

<b>Agency/Board/Commission:</b>	Tennessee Department of Human Services
<b>Division:</b>	Family Assistance
<b>Contact Person:</b>	Phyllis Simpson
<b>Address:</b>	Office of General Counsel Citizens Plaza Building, 15 <sup>th</sup> Floor 400 Deaderick Street Nashville, Tennessee 37243-1403
<b>Phone:</b>	615-313-4731
<b>Email:</b>	phyllis.simpson@tn.gov

*Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:*

<b>ADA Contact:</b>	Jeffrey Blackshear
<b>Address:</b>	Office of General Counsel Citizens Plaza Building, 15 <sup>th</sup> Floor 400 Deaderick Street Nashville, Tennessee 37243-1403
<b>Phone:</b>	615-313-4731
<b>Email:</b>	jeffrey.blackshear@tn.gov

**Hearing Location(s)** (for additional locations, copy and paste table)

Address 1:	Citizens Plaza Building 2 <sup>nd</sup> Floor Conference Room 1 400 Deaderick Street		
Address 2:			
City:	Nashville		
Zip:	37243-1403		
Hearing Date :	11/30/10		
Hearing Time:	1:30 PM	X CST	EST

**Additional Hearing Information:**

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**Revision Type (check all that apply):**

- ☒ Amendment  
☐ New  
☐ Repeal

**Rule(s)** (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
1240-01-02	Family Assistance Unit - Food Stamp Program
Rule Number	Rule Title
1240-01-02-.02	Household Concept - Food Stamps Only

Chapter Number	Chapter Title
Rule Number	Rule Title

Chapter 1240-01-02  
Family Assistance Unit  
Food Stamp Program

Amendments

Rule 1240-01-02-.02 Household Concept - Food Stamps Only, is amended by deleting subparts (i) and (ii) under paragraph (6), subparagraph (a), part 2. Subparts (iii) through (xi) under part 2 subparagraph (a) paragraph (6) are not being amended. As amended paragraph (6), subparagraph (a), part 2, subparts (i) and (ii) shall read as follows:

- (i) Be working an average of 20 hours each week or an average of 80 hours per month or if self-employed, be working an average of 20 hours per week or an average of 80 hours per month or receiving monthly earnings at least equal to the Federal minimum wage multiplied by 80 hours;
- (ii) Must participate in a State or federally funded work-study program (funded in full or in part by Title IV, Part C of the Higher Education Act of 1965, as amended) during the school year;

Authority: T.C.A. §§ 4-5-201 et seq.; T.C.A. § 4-5-202; T.C.A. §§ 71-1-105 and 71-5-304; 7 U.S.C. § 2015(e)(4); 7 C.F.R. § 272.3(c)(1)(ii); 7 C.F.R. § 273.5(b)(5) Food and Nutrition Service Waiver September 1, 2010; and 7 C.F.R. § 273.5(6).

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name of Officer: Phyllis Simpson

Assistant General Counsel

Title of Officer: Tennessee Department of Human Services

Subscribed and sworn to before me on: \_\_\_\_\_

Notary Public Signature: \_\_\_\_\_

My commission expires on: \_\_\_\_\_

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Filed with the Department of State on: \_\_\_\_\_

\_\_\_\_\_  
Tre Hargett  
Secretary of State